



Due Date: November 3, 2006

**Arizona State Retirement System
System Option Feedback Form**

As you now know, the ASRS is considering offering System members a one-time opportunity to move to the ASRS Defined Benefit Plan and receive a guaranteed monthly lifetime benefit. Meetings will be held around the state to inform System members of ASRS investment and actuarial concerns and to explain options System members may consider to address these concerns.

It is our hope that System members will attend a meeting to hear the presentation and to ask questions. If it is not possible to attend a meeting, the contents of your packet contain information that summarizes the concerns and the options being offered.

Please use this form to provide feedback on the ASRS's proposal. Regardless of your choice, it is the intention of the ASRS to continue the System for those members who do not wish to move to the ASRS Defined Benefit Plan and receive a guaranteed benefit.

☐ **I support the proposal.** Checking this box indicates you wish the ASRS to seek legislation to allow System members the opportunity to move to the ASRS Defined Benefit Plan with a guaranteed benefit and eligibility for future permanent benefit increases (PBIs).

☐ **I do not support the proposal.** Checking this box indicates you do not want the ASRS to seek legislation to allow System members the opportunity to move to the ASRS Defined Benefit Plan. If you checked this box, please explain why.

Please state any questions you may have._____

Name: *(please print)*_____

Address:_____

Phone Number: ____ (____) _____

Please return your completed Feedback Form in the enclosed return-addressed stamped envelope no later than November 3, 2006.